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Summary of mid-term reviews and major evaluations of country programmes

East Asia and Pacific region

Summary

The present report was prepared in response to Executive Board decision 1995/8 (E/ICEF/1995/9/Rev.1) which requested the secretariat to submit to the Board a summary of the outcome of mid-term reviews (MTRs) and major country programme evaluations, specifying, *inter alia*, the results achieved, lessons learned and the need for any adjustment in the country programme. The Board is to comment on the reports and provide guidance to the secretariat, if necessary. The MTRs described in the present report were conducted during 1998.

Introduction

1. Five countries in the East Asia and Pacific region reached the mid-point of their country programme cycles in 1998. Four of the mid-term reviews (MTRs) are covered in the present report. Due to the uncertain political situation in Cambodia, the review for that country programme has been delayed until November 1998; therefore, it will be included in next year's report. In view of the number of MTRs in the region and the size and significance of the programmes involved, this report is devoted entirely to these reviews. Next year's report will give greater emphasis to a discussion of evaluation activities in the region.

2. A great deal of effort went into the 1998 round of MTRs at both country and regional levels. The five programmes reviewed are the region's largest, giving special visibility and significance to these exercises. Moreover, the MTR itself has taken on greater importance within the overall context of management excel

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lence, accountability and effectiveness. Concurrent reviews of the five largest country programmes was seen very much as a pioneering effort for the region, providing examples and setting precedents for future years. For these reasons, the MTRs were given very high priority.

3. Another factor contributing to the "special" nature of 1998 is that it was a year of extraordinary economic and political turmoil, the impact of which has been apparent throughout the region, but is particularly marked in several MTR countries. Indonesia has been the hardest hit of all the countries by the economic crisis that struck in mid-1997, threatening progress built up over several decades and toppling the 32-year regime of President Suharto. In Cambodia, the inability to form a stable Government following parliamentary elections in July continues to obstruct even routine developmental work. Despite a reconfiguration of its military Government and its admission as a full member of the Association of South-East Asian Nations (ASEAN), the political situation in Myanmar has resulted in a continuation of sanctions and a general lack of donor support. In addition to the effects of the economic crisis, which have been less serious than elsewhere but are none the less a cause for concern, China experienced enormous damage from floods in the second half of 1998. Viet Nam has probably been the least subjected to severe shocks during 1998, although the effects of the economic crisis have begun to be felt, and its ultimate impact is still unclear.

4. The UNICEF Regional Management Team (RMT) saw important opportunities, both before and during the review process, for sharing experience, expertise and best practices. Regular RMT meetings have been a forum for substantive discussion, feedback and coordination. The regional office played a major role in the process. Regional advisers visited every MTR country at least once and participated actively and intensively in the design and implementation of studies, evaluations and other related activities. UNICEF representatives and staff from other countries participated in some of the MTRs.

5. The evaluative content of 1998 MTRs was exceptionally high. In all countries undertaking MTRs, significant evaluations were undertaken specifically to enhance the review process, and the MTRs were themselves major evaluative undertakings. In every country, extensive, systematic analysis of progress and constraints in programme implementation, based on field monitoring data and programme documentation supplemented by special studies, was an integral component of the review process.

Country mid-term reviews

China

6. Nearly two thirds of the region's children live in China. Thus, the success or failure of its efforts to promote child rights and welfare have very important implications for the region as a whole. China's commitment to its children is strong, and it has been a leader in many areas such as education and mortality reduction. However, the ongoing socio-economic transition and Government reorganization pose significant challenges in maintaining this leadership role, sustaining past achievements and successfully addressing newly emerging problems and issues.

7. The MTR meeting was the culmination of an extensive review of the China country programme for 1996-2000. The review process was highly participatory and collaborative. Project and programme reviews took a frank and objective approach to issues and emphasized cross-sectoral linkages to strengthen their contribution to the overall country programme and national goals for children. Sectoral field assessments were a particularly useful part of the exercise, providing opportunities to observe the actual availability of expected inputs or services on the ground and to assess their effectiveness. A cross-sectoral team was fielded to examine the risks faced by children and women from the poorest and most isolated families and communities. This provided a deeper understanding of the special challenges to achieving the goals of the National Programme of Action (NPA) in the most deprived areas and among families most in need. The results of this exercise were used particularly to draw strategic conclusions and formulate guidelines for local plans of action for achieving the NPA goals.

8. **The situation of children and women**. Progress in reducing infant and child mortality has been steady, and China appears to be on track for reaching the child survival goals. The decline in the under-five mortality rate since 1990 means that 400,000 fewer young children died in 1997 than at the beginning of the decade. No new cases of polio have been detected in the last two years. Child malnutrition has also shown a steady decline, with underweight levels in 1995 about 20 per cent lower than in 1990. Great strides have been made in the consumption of iodized salt, now available in more than 80 per cent of all households as compared with 51 per cent in 1995. Government water programmes for water-scarce areas have reached 30 million of the 80 million people living in these areas. Net enrolment at the primary level is reported at roughly 99 per cent for both boys and girls. National efforts are under way to better fulfil the provi-

sions of the Convention on the Rights of the Child and the Convention on the Elimination of all Forms of Discrimination against Women.

9. There is, however, a tendency towards wide disparities between urban and rural areas and among provinces and regions. For example, a 1995 multiple indicator cluster survey (MICS) found that only 7 per cent of rural households had sanitary latrines as compared with 74 per cent in urban areas. The percentage of underweight children is nearly four times as high in rural areas as in urban areas, and under-five mortality varies among provinces from a low of 9 deaths per 1,000 live births to a high of 73 deaths. Emerging issues such as HIV/AIDS, education for the children of migrant or "floating" population groups, kidnapping and exploitation of children, and domestic violence are matters of growing concern.

10. **Achievements and constraints**. The ongoing programme of cooperation fits well with the Government's overall policies for social development, and the MTR concluded that, for the most part, planned objectives and targets are being achieved. In the area of child survival, UNICEF provision of supplementary vaccines for subnational immunization days has played a crucial role in China's progress towards polio eradication. In UNICEF-assisted water and environmental sanitation projects, 1.4 million persons have benefited from handpump systems, 24,000 families have been reached with direct support for sanitary latrines, while an additional 190,000 families have been motivated to install latrines using their own resources. A health financing project is developing and testing a variety of health insurance schemes to improve access of rural families to preventive and curative health care.

11. A primary education project is promoting innovations to bring children into school in 102 of China's least developed counties. It has helped to raise girls' enrolment rates above 95 per cent in over one half of these counties and to increase from 30 to 53 the number of counties where the enrolment gender gap is less than 1 per cent. Collaboration with other United Nations organizations has been particularly effective in maternal and child health (MCH), immunization, primary education, prevention and control of HIV/AIDS and iodine deficiency disorders, and the strengthening of poverty alleviation efforts for women.

12. Among the constraints to efficient and effective programme implementation is the pronounced verticality in the structure and management of many projects which limits their ability to mobilize multisectoral responses in areas such as malnutrition and hygiene and sanitation, and hinders the coordination of communication and family education initiatives. There is serious concern that the share of public funding for social sector programmes, particularly health, is stagnant or actually declining. This is affecting access to and utilization of basic services, especially those oriented towards prevention. Official encouragement of financial self-sufficiency by health institutions, for example, has led to a greater focus on curative medicine. The lack of good quality and up-to-date data, disaggregated by sex, location and other relevant variables, is another constraint to effective planning and targeting in many sectors.

13. **Assessment of programme strategies: lessons learned**. Initiatives for NPA decentralization have resulted in the establishment of programmes of action for children in all provinces and in more than 80 per cent of China's 2,000 counties. Capacity-building for local planning in poor areas is being expanded rapidly by the national Government. Health sector experience has demonstrated, however, that the devolution of responsibility to local governments, communities and mass organizations needs to be balanced by central policy coordination to assure adequate funding and consistent back-up support, especially in the poorest areas.

14. The rapidly changing situation in China has required previous strategy adjustments, beginning in 1996 with consultations on emerging perspectives on child rights. Other adjustments since then have focused on unreached children, stronger programme linkages with the Government's poverty reduction initiatives and emerging issues such as child trafficking and HIV/AIDS. Such expansion in areas covered in the cooperation requires strengthening of the advocacy role of UNICEF and the engagement of new partnerships.

15. During the MTR, the Government indicated that reaching the NPA goals for sanitation and malnutrition reduction should be given enhanced national attention; and in the poorer counties, the elimination of neonatal tetanus and maternal mortality reduction should also be emphasized. In line with government poverty alleviation policies, it was agreed that more attention should be focused on disadvantaged and minority areas, with an emphasis on advocacy and capacity-building to address more effectively the social dimensions of poverty. Initiatives to improve coordinated planning and convergent delivery of services to the poor counties will be tested during the second half of the cooperation. It was also agreed that more attention should be given to emerging issues and problems of children, ensuring their continued access to basic services and protecting their

rights in a rapidly changing social and economic environment. These emerging issues include urban poverty, the girl child, child trafficking and HIV/AIDS. Efforts in resource mobilization for children should also be strengthened.

Indonesia

16. Indonesia is suffering from the current economic crisis more than any other country in the region. Whereas per capita income grew by 6 per cent or more throughout the first half of the present decade, forecasts for 1998 indicate a decline in gross domestic product of 13 per cent or more. Unemployment now stands at about 15 per cent of the economically active population, affecting 15 million to 20 million people.

17. The extensive review process included provincial reviews in each of the seven provinces selected for special programme focus and separate sectoral reviews for the 14 subcomponents that comprise the country programme. The National Planning Board took responsibility for overall coordination of the exercise, which involved all partner ministries and implementing agencies at subnational levels. Major donors, United Nations agencies and selected non-governmental organizations (NGOs) were also consulted. The review methodology included a retrospective analysis of the country programme to date as well as the formulation of proposals for significant realignment during the 1999-2000 period in response to the ongoing crisis. Consultation and review of programme documentation and field data were supplemented by evaluations in three areas of particular importance to the cross-sectoral, decentralized thrust of the country programme strategy (safe motherhood, strengthening of local planning and demand creation for universal consumption of iodized salt).

18. **The situation of children and women**. The impact of the economic crisis on poor families across the country is threatening many of the gains achieved over the past several decades. An ongoing, longitudinal "100 village survey" has been modified to obtain specific information on the impact of the crisis. An analysis of this data is expected to be available before the end of the year. Partial and scattered data from other sources are very disturbing. Hospital records in East Java reveal a sharp rise in severe malnutrition among young children. Data from four provinces showed a 25 per cent increase in childhood anaemia and a doubling of diarrhoea incidence among both women and children. The Government estimates that as many as 6 per cent of primary students and 13 per cent of junior secondary students (a total of about 8 million children) may be forced to drop out of school. This compares with about 2.8 million drop-outs in a normal year.

19. **Achievements and constraints**. During the first half of the programme cycle, nearly universal access to iodized salt was achieved, and over 23 million children under five years old were reached in each of three successive rounds of national immunization weeks aimed at the eradication of polio. UNICEF field offices in five provinces provide a presence at the field level that has facilitated leveraging of government resources for social sector programmes and the strengthening of local government capacity to respond rapidly and effectively to needs brought about by the ongoing crisis.

20. **Assessment of programme strategies: lessons learned**. The programme structure outlined in the master plan of operations (MPO) consisted of three main components — service delivery, advocacy and social mobilization, and capacity-building — and 14 supporting subcomponents. The main components were expected to be mutually supportive and reinforcing and to focus respectively on "What", "Why" and "How" issues to be addressed by the overall programme. However, experience in the first half of the programme cycle showed that the intended integration and mutual support functions of this design were difficult to achieve. One major constraint was the mismatch between the structure of the programme and that of the Government bureaucracy. Each operational subcomponent tended to establish its own set of counterparts at national and subnational levels, with separate and sometimes inconsistent objectives, and, in many instances, focusing on different geographical areas. In addition, although the programme design was logical and even elegant in concept, it became quite complex in practice, and planning, coordination and monitoring accordingly grew in complexity as well. These factors were taken into account at the MTR when it was agreed that the country programme would undergo a major realignment to more effectively respond to the drastically changed economic environment. Consequently, a revised and somewhat simplified programme structure was also recommended and agreed to during the MTR.

21. The proposed realignment of the country programme is based on the original goals, objectives and principles outlined in the MPO. Pursuit of the major end-decade goals and adherence to the principles of decentralization, resource leveraging and community empowerment will be retained, but with a sharper focus on a limited set of key strategies and programming areas.

22. The new crisis response programme will present opportunities to achieve a sharper focus on critical priority areas. It consists of four major programme areas (community self-help for MCH; integrated efforts in diarrhoeal disease control and water and sanitation; revitalization of the network of integrated service posts (*posyandu*) as an outreach vehicle for all health and nutrition interventions; and support for basic education to maintain enrolment levels and prevent drop out). The basic education component represents a re-entry by UNICEF into this sector. Education was not included in the original country programme plan in view of Indonesia's strong performance in that field. However, the prospect of large numbers of children not enrolling or dropping out of primary school as a result of the crisis was thought to justify renewed UNICEF assistance. Supporting activities will be clustered in the areas of integrated local management and planning to strengthen crisis response, integration of communication messages and channels, and more focused monitoring, evaluation and information management. Four activities from the current programme are regarded as essential for the achievement of major goals and commitments, and will be continued: food fortification/salt iodization; universal child immunization (UCI); support for institution-building for child protection; and programme development for early child care and development (ECCD).

Myanmar

23. Myanmar is on track to meet several of the NPA targets and MPO objectives such as child immunization and polio eradication. However, there has been retrogression in education and an inadequate response to the rapid spread of HIV/AIDS. Following Myanmar's first country report to the United Nations Committee on the Rights of the Child, the Government has allowed some discussion on the recommendations of the Committee and has agreed in principle to review the Child Law to strengthen compliance with the Convention on the Rights of the Child. However, progress is slow.

24. The MTR process was designed to strengthen participation and ownership of its findings. The Government, other United Nations agencies and NGOs worked with UNICEF through programme review groups to examine each programme. A total of 16 studies and evaluations were carried out to provide a firm foundation for programme assessment. A broad group, including the Government, bilateral donors, UNICEF Executive Board and ASEAN members, United Nations agencies and NGOs, participated in the MTR meeting.

25. **The situation of children and women.** Children in Myanmar still face many challenges. Although child mortality is thought to have declined in recent years, more than 100,000 children still die before the age of five years. Major causes are low birth weight, neonatal problems, pneumonia, diarrhoea and malaria, compounded by the effects of malnutrition. For maternal mortality, all available estimates show a wide range of variation, but it is known to be among the highest in the region, ranging from 100 to 580 per 100,000 live births depending on the different sources of reference. Poor sanitation, unsafe water and inadequate hygiene practices are major contributors to morbidity, and malarial outbreaks also constitute serious health risks for children and pregnant women. In recent years, the HIV/AIDS epidemic has reached alarming levels.

26. MICS data show a decline in net primary school enrolment from 85 per cent in 1995 to 83 per cent in 1997, and in the completion rate from 34 to 27 per cent. This is the lowest completion rate in the region, and one of the lowest in the world — a particularly worrisome situation in a country that had made remarkable progress in basic education and literacy in the early decades after independence. Child labour, sexual trafficking and children in conflict with the law are particular concerns in the area of child protection. Very little hard data exist, but indications are that measures for the prevention and protection of these children are insufficient. For most indicators of children's and women's welfare, urban-rural disparities are considerable. The 75 per cent of the population residing in rural areas, especially those living in the peripheral border townships, often lack access to basic services.

27. **Achievements and constraints**. During the first two years of the programme, UNICEF Yangon was able to mobilize $9 million in supplementary funding from 17 different donors, representing 38 per cent of the five-year ceiling. However, the funding environment remains highly constrained. To counter the recent sharp decline in supplementary resources, UNICEF Yangon is developing a comprehensive fund-raising strategy and searching for more effective ways to work with NGOs.

28. In several areas, achievements have exceeded expectations. In three years, National Immunization Days (NIDs) have reached nearly 5.5 million young children. No cases of wild polio virus infection have been reported since 1996. Supplementation to eliminate vitamin A deficiency has also made considerable progress, rising from only 6 per cent of children under two years old in 1995 to 61 per cent in 1997. Salt iodization has progressed rapidly. In 1997, 66 per cent of households

consumed iodized salt, up from 14 per cent in 1995. Over the past four years, the Continuous Assessment and Progression System (CAPS) and All Children in School (ACIS) projects have increased net enrolment from 44 to 61 per cent and completion rates in project schools from 65 to 75 per cent. In total, these projects reach more than 15,000 rural primary schools, or nearly one half of the total number, and serve about 1.8 million children.

29. **Assessment of programme strategies: lessons learned**. In the remainder of the programme period, priority will be given to the elimination of neonatal tetanus, universal salt iodization (USI), implementation of the Integrated Management of Maternal and Childhood Illness (IMMCI) initiative, ECCD, strengthening the vital registration system and promoting life skills through the educational system.

30. Intensive advocacy has been an effective tool to mobilize political support for high-impact activities such as NIDs, USI and National Sanitation Week. Capacity-building strategies targeting government counterparts, NGOs and communities have also been effective in improving the quality of services provided to children and women, and in fostering progress towards implementation of the principles of the Convention on the Rights of the Child. Implementation of two rounds of MICS in 1995 and 1997 has strengthened capacity to carry out data collection exercises and utilize their findings.

31. Opportunities for closer cooperation with local NGOs and religious groups are being examined, especially those working in border areas and in activities for children in need of special protection. The benefits of cross-border collaboration have been clearly demonstrated in the joint planning and implementation of NIDs and acute flaccid paralysis surveillance between Myanmar and China's Yunnan province. Further opportunities for cross-border collaboration might be identified.

32. The current programme has worked effectively to achieve most MPO objectives, and there is no need for major structural change. However, the CAPS and ACIS projects will be merged in the second half of the cycle to facilitate "expansion through integration". The IMMCI strategy will be implemented through a new project created by merging the control of diarrhoeal diseases/acute respiratory infections (ARI) and community health management and financing projects. These changes should reduce duplication and increase cost-effectiveness. Core programme activities, including UCI and NIDs, HIV/AIDS prevention, vitamin A supplementation, review of the Child Law, Sanitation for All, CAPS/ACIS integration and traditional water source upgrading will continue to be supported in full. UNICEF participation in United Nations Inter-agency Thematic Working Groups, such as the Joint and Co-sponsored United Nations Programme on HIV/AIDS, will also be continued.

33. **Country programme management plan (CPMP)**. An internal Resource Management Working Group undertook a thorough assessment of a wide range of management issues covering supply, administration, information technology, finance and personnel. A full CPMP will be undertaken in 2000. Recommendations from the April 1996 internal audit are being implemented, and systems have been established to improve resource management efficiency.

Viet Nam

34. The overall environment in Viet Nam is very supportive of all matters related to children, and the country continues to attract substantial donor support. The Consultative Group on Viet Nam, for example, has committed over $6 billion in official development assistance (ODA) during the last three years. A study of domestic and ODA allocations for basic social services was prepared as part of the Government's response to the Oslo "20/20" conference of 1996, and in late 1998, Viet Nam hosted a follow-up conference in Hanoi. Viet Nam was designated as a pilot country for the preparation of a United Nations Development Assistance Framework (UNDAF). That document, completed in April 1998, now forms the basis for all United Nations reform initiatives in the country.

35. A programme audit in September 1997 started the MTR process by identifying 10 issues requiring follow-up and special attention. Planning and strategy development with the Ministry of Planning and Investment followed shortly thereafter, initiating a process of continuous dialogue between UNICEF staff and their government counterparts. Findings and recommendations from the 27 evaluations and studies carried out since the start of the country programme helped to identify critical issues and unfinished business.

36. In the spirit of UNDAF, the formal MTR meeting was opened by the United Nations Resident Coordinator, and was attended by principal government counterparts, United Nations agencies, NGOs, donor and Executive Board embassy representatives, the World Bank and UNICEF staff from New York headquarters and the regional office.

37. **The situation of children and women**. The transition to a market economy has brought benefits to many Vietnamese, but it has also brought new problems. The removal or reduction of government subsidies for social services and the introduction of user fees have had the most serious impact on the poor, especially ethnic minorities, and urban-rural and lowland-highland inequities have been exacerbated.

38. The rapidly growing number of children involved in drugs, trafficking, violence, abuse and prostitution is a matter of serious concern. However, the scale of these problems and the complex dynamics that shape them are not well understood, and current efforts to deal with them are of limited effectiveness. Considerable resources are being mobilized to control the spread of HIV/AIDS, but the incidence of the disease is increasing rapidly in some urban centres, particularly Ho Chi Minh City.

39. The incidence of perinatal mortality, ARI and diarrhoeal diseases remains high, slowing progress in reducing infant and under-five mortality. More than 40 per cent of the under-five population is under weight; but efforts aimed at eliminating vitamin A and iodine deficiency disorders have been very effective. Forty-four of the 61 provinces have adequate access to iodized salt. Less than 50 per cent of the rural population have access to clean water; however, an even smaller proportion use sanitary means of excreta disposal. Some 40 per cent of children aged three to five years are attending kindergarten, and over 90 per cent of primary school-age children are enrolled in school. However, access to education, health care and adequate nutritional intake are often lowest for women and girls, and in minority ethnic communities.

40. **Achievements and constraints**. The goals for immunization and oral rehydration therapy utilization have been met, and polio eradication, neonatal tetanus elimination and measles control are close to fulfilment. Remaining problems include high levels of maternal mortality and the very limited access to services and care for disadvantaged segments of society. Little progress has been made in solving the chronic problem of child malnutrition.

41. Over 26,000 new water points were constructed during the first years of the country programme, and over 1,200 school latrines have been installed. UNICEF-assisted education projects have provided early learning for 47,000 children under three years old and over 85,000 five-year-olds. Almost 130,000 students are now enrolled in multigrade and bilingual schools, and alternative basic education has been provided to 115,000 disadvantaged children. However, the MTR concluded that project inputs have been spread too thinly over too large an area.

42. The review found that household income has increased and the status of women has improved through activities for income generation, *Facts for Life* communication and post-literacy training. Advocacy on behalf of children in need of special protection measures has helped to sensitize both the Government and the public and to give child protection a more prominent place on the political agenda. Recent Government directives on street children and child labour are indicative of progress in this direction. The mass media now openly report on several previously sensitive issues related to children in need of special protection. A life skills approach is being used to introduce HIV/AIDS into the education system.

43. The ethnic minority development project acts as a catalyst to attract government and donor funding to help reduce the disadvantages faced by ethnic minorities. The project has created models of integrated services that are now being adopted by other cooperating partners.

44. **Assessment of programme strategies: lessons learned**. The MTR process identified a wide range of lessons in each programme area, some of which apply across multiple sectors. Several sector reviews identified the need for more precise geographic and social targeting. Experience in focusing on ethnic minorities has shown that achieving the main human objectives of a project or programme may require some tailoring of standard input packages to take into account special factors such as language, cultural practices and limited media access. The availability, timeliness, quality and appropriateness of programme-related data is another issue common to many programme areas. Country programme management has been strengthened through the establishment of annual tri-partite reviews involving the Ministry of Planning and Investment, the respective sectors and UNICEF.

45. Child protection is to be mainstreamed throughout the country programme in order to raise awareness and stimulate action on child labour, disability and sexual exploitation. MCH and primary health care activities will be integrated in pilot districts to strengthen the district health system and improve the delivery of MCH services. Community-based monitoring will also be introduced in these areas. The area-focused approach is to be reoriented to improve convergence of project inputs in 125 of the country's 598 districts, and a system of close monitoring and observation will be introduced in a small number of the selected districts. Efforts to control young

child malnutrition will be concentrated in 500 of the poorest communes. An integrated monitoring and evaluation plan, based on clear and measurable objectives, will be developed to provide better guidance for monitoring and progress assessment at programme, sectoral and projects levels.

46. A demand-based approach will be applied for water and sanitation in better-off areas where programme inputs will be limited to seed funds, design assistance and loans recoverable through consumption fees. Installation costs will be borne by users. In early childhood care for growth and development, an integrated strategy will be developed to help families and communities meet the physical, psychosocial and emotional needs of children through better overall care. In child protection, the programme will focus on families, particularly those in high-risk and vulnerable areas, and on addressing the root causes of child exploitation. The ethnic minority development project will be expanded to include the Central Highlands, and the HIV/AIDS project will be extended to include Hanoi and Ho Chi Minh City.

47. **CPMP**. An internal review of UNICEF staffing concluded that if UNICEF is to be able to provide technical support, acknowledged to be the most critical requirement for development in Viet Nam, appropriately qualified staff need to be recruited and retained. The review also recognized a need to improve cost-effectiveness and efficiency, and to make better use of junior professional officers and United Nations volunteer positions.

48. A careful review of the role of Ho Chi Minh City sub-office concluded that the sub-office should be retained. Its structure and specific responsibilities should be reformulated to strengthen its capacity in the area of child protection, which is rapidly assuming increased importance in the southern part of the country. In the spirit of UNDAF, the sub-office already shares common premises and other support services with other United Nations agencies.